3657,00

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10825357

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			88		<u>.                                    </u>	•		RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			8% minus 20=		. 88			XS 9=	612	OR	X\$18=	, . 4.
INC	EPENDENT C	AIMS	4 mi	nus 3 =	1			X43=	43	OR	X86=	.10
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1040	OR	TOTAL	<u> </u>
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							٠.	SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID 1	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 87	Minus	- 8	8	- 0		X\$ 9=		OR	X\$18=	
AME	independent	• Y	Minus	ENDENT	9	. 0		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290≔	
112.00 1X a								TOTAL ADDIT. FEE	ţ	OR	TOTAL ADDIT. FEE	
Щ	) NO.	(Cotumn 1)		(Colum		(Column 3)	٠.					
ENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID-	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	.08	Minus	-0	$\mathcal{D}_{L}$			X\$ 9=	. /	OR	X\$18=	
AME	Independent	NTATION OF MU	Minus	/	7			X43=	/	OR	X86=	
لــا	PIRST PRESE	NIAHON OF MO	LIPUE DEP	ENDENI	CLAIM	<u> </u>	'	+145=	/	OR	+290=	7.
		•				•	· L	TOTAL NOOIT, FEE		OR	TOTAL ADDIT: FEE	
				•			•					
ENT C		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI: TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total	•	Minus	•	•	•		X3 9=		OR	X\$18=	
AMENDME	Independent	•	Minus	***		-	<u> </u>	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=			+290=	
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							TOTAL		OR	TOTAL	·
	f the "Highest No	mber Previously Pa mber Previously Pa ber Previously Paid	id For IN THIS	S SPACE is	less than	3. enter "3."		DOIT. FEE			COIT. FEE	